

2-7-7-3

FIFTEENTH REPORT
OF THE
LUNACY COMMISSION

TO HIS EXCELLENCY
THE GOVERNOR OF MARYLAND.

DECEMBER 1ST, 1900.



BALTIMORE:
THE SUN BOOK AND JOB PRINTING OFFICE.
1901.

FIFTEENTH REPORT

792540

OF THE

LUNACY COMMISSION

TO HIS EXCELLENCY

THE GOVERNOR OF MARYLAND.

DECEMBER 1ST, 1900.



BALTIMORE:

THE SUN BOOK AND JOB PRINTING OFFICE.

1901.

THE LUNACY COMMISSION,

STATE OF MARYLAND

PRESIDENT :

JOHN MORRIS, M. D.,
BALTIMORE, MD.

THOMAS S. LATIMER, M. D.,
BALTIMORE, MD.

I. E. ATKINSON, M. D.
BALTIMORE, MD.

C. BIRNIE, M. D.,
TANEYTOWN, MD.

ATTORNEY-GENERAL :
ISIDOR RAYNER,
BALTIMORE, MD.

SECRETARY OF THE COMMISSION :
GEORGE J. PRESTON, M. D.

OFFICE OF THE COMMISSION :
819 NORTH CHARLES STREET, BALTIMORE, MD.

FIFTEENTH REPORT

OF THE

LUNACY COMMISSION.

*To His Excellency, JOHN WALTER SMITH,
Governor of the State of Maryland:*

The law of the State requiring an annual report from the Lunacy Commission, submitting all facts concerning the condition of the insane, therefore the Commission begs leave to present to your Excellency a brief history of what has been accomplished during the past year in behalf of the insane of the State of Maryland. This report has been delayed, owing to the negligence of some of the institutions in sending in their statements so as to afford the Commission those facts necessary for the completion of their work.

No better presentation of the actual state of the Hospitals and Asylums of Maryland can be given than that furnished by the Secretary in his admirable report, which is herewith submitted. It will be seen by a perusal of this paper that the State hospitals are well equipped and wisely managed. Since our last report great progress has been made in the benevolent work of ministering to the insane, as well as in their proper management. The separation of the acute from the chronic cases, allotting the acute to Spring Grove, and the chronic cases to Springfield, has been worked beneficently so far and cannot fail to produce better conditions in the future. These two institutions, as stated in former reports, are a credit to the commonwealth. The women's group at Springfield was opened during the year, and it can be confidently stated that there is no hospital in this country or elsewhere surpassing it in excellence of design or equipment. There are some necessary improvements needed to make this institution

what it was intended to be—a model of construction and utility. These are: Industrial shops, electric railway from Sykesville through the property of the State to the hospital, and long-distance telephone.

The suggestion of the electric railway was made some years ago by the Lunacy Commission, but was never acted upon by the Legislature. It could be built at a very small expense if carried through the grounds of the hospital. A roadbed has been made from the county pike to the hospitals, which would serve for the electric road. A single car with a tender would be sufficient. The force necessary could be furnished by any of the cheap agencies employed at the present time in our cities to secure this end.

The Secretary urges the erection of a group of buildings at Springfield for the criminal insane. The Commission in former reports suggested an annex at the House of Correction at Jessup's Cut for the purpose, there being inmates of that institution sufficiently intelligent to act as attendants and nurses. Whilst there is sufficient acreage to erect a hospital for criminals at Springfield, it might not be deemed advisable by some persons, unless at a great distance from the main group of buildings.

The Secretary's views in regard to Bay View are wise and will meet the approbation of every intelligent citizen.

PRIVATE AND CORPORATE INSTITUTIONS.

It is pleasing to learn that the private and corporate institutions of Maryland are doing excellent work and that there are enough of them to receive all the cases desiring private care.

COUNTY ASYLUMS.

It goes without saying that these institutions cannot properly care for the insane. The great need in asylums is to have a number of intelligent attendants; indeed, no hospital or asylum can be well managed unless there be a sufficient corps of these employed. The separation and the removal of the insane from these so-called asylums was the most practical step taken by the State in behalf of its unfortunate wards. Dr. Preston's description of the condition of the county almshouses is no doubt accurate in every respect.

RESTRAINT.

The absence of all duress in the State hospitals is a notable fact, and so far the "open-door" system has proved a wonderful success.

EPILEPTICS.

The establishment of an epileptic colony at Springfield would be a blessing and would cheer the hearts of hundreds of parents throughout the State. There are about eight hundred of this unhappy class in Maryland, four hundred of whom have applications at this time filed at Owings Mills.

NEGRO INSANE.

The negro insane are increasing daily and the State has done nothing so far in their behalf. North Carolina is much in advance of every State in the Union in this respect. There are now four hundred occupants of the negro asylums, and applications are daily made for admittance. The State made at the last session of the Legislature an appropriation of \$10,000 for the erection of additional buildings. These insane negroes are employed on the public roads. The condition of the insane at Montevue Hospital at Frederick is shameful, and should at once be remedied. The beasts of the fields are better cared for than the poor negroes at Montevue.

THE SECRETARY.

We desire to express our great appreciation of the labors of our Secretary, involving many times great fatigue and always severe trials. We have in former reports recommended an increase in his salary, which is at present a mere pittance, taking into consideration the nature of his duties.

CONCLUSION.

The Commission can do no better than to end this report to your Excellency by concluding the Secretary's concluding paragraph: "The Commission may point with pride to the facts that the insane patients requiring treatment have practically all been

removed from the county almshouses; that the mingling of the sexes has been largely prevented; that only two suicides have occurred among hospital patients, and that the general condition of the insane has greatly improved during the past year."

With great respect,
Your Excellency's obedient servant,

JOHN MORRIS,
President.

REPORT OF THE SECRETARY.

To the Members of the Lunacy Commission:

GENTLEMEN—I have the honor to submit the following report:

GENERAL CONDITION OF THE INSANE IN THE STATE.

It is a matter of congratulation that nearly all the insane persons who need asylum treatment have been removed from the county almshouses. The County Commissioners have, in many instances, acted upon the advice of the Secretary in transferring cases that could not be properly cared for in the almshouses, to one of our State institutions. The great majority of the cases remaining in the almshouses that are technically classed as insane are cases of dementia, epilepsy, idiocy and the like, and do not need asylum treatment. It is to be regretted that some of the almshouses are dilapidated and badly managed, and in no way fitted for the care even of such cases as those mentioned above.

STATE AND CITY HOSPITALS FOR THE INSANE.

Our State hospitals, detailed accounts of which will be given further on, are well equipped and admirably managed. To some extent the plan suggested in former reports, of sending the acute cases to the Maryland Hospital for the Insane (Spring Grove), and the chronic cases to Springfield, has been carried out. The Maryland Hospital for the Insane (Spring Grove), situated so near the city, is well adapted for the treatment of acute cases, while the Springfield Hospital, with its large acreage, is admirably suited for the care of the chronic cases.

The city asylum—Bay View—is distinctly inferior to the two State institutions. It is by no means well adapted for the care of the insane, there being very little available ground around it, and

no means of giving the patients occupation. Then, too, the stigma of the "Poor House" is so indelibly impressed upon it that many worthy people prefer to take the risk of keeping their insane relatives at home rather than send them to this institution. This, perhaps, is false pride; but the Secretary sees a great many persons in the course of a year that positively refuse to allow their insane relatives to be sent to Bay View. The other State institution—the Maryland Training School and Home for Feeble Minded—is doing most excellent work, but is greatly overcrowded. The State may be justly proud of its institutions for the care of the insane and feeble minded, but at the same time should recognize the fact that much more room is needed and more money for better equipment.

PRIVATE AND CORPORATE INSTITUTIONS.

These institutions, over which the Lunacy Commission exercises the same supervision as in the case of the State hospitals, are all well managed and do excellent work. In general, they are located in the beautiful country which surrounds Baltimore. There are enough of these institutions to receive all the cases desiring private care.

COUNTY ASYLUMS.

A distinction must be drawn between county asylums and county almshouses. The former, of which there are four in the State, attempt to care for the insane apart from the paupers. The buildings are fairly well planned, and in general well managed. It is, however, utterly impossible for a county, with the limited means at command, to properly care for its insane. Two of these asylums have more than a hundred insane patients. In no instance is there a resident medical officer, and the superintendent's office is a political one, subject to change with every change in politics in the county. In almost every instance these asylums are overcrowded, no classification of patients is attempted, the number of attendants is utterly inadequate, and the patients are given no employment. Little is done in the way of treatment, the dominant idea being custodial care. The day has, fortunately, passed when the insane are simply confined as prisoners, and these institutions belong to the old era. We have in the

State between three and four hundred insane persons in these county asylums. The superintendents, as has been said, are entirely without training in the management of the insane, and the same may be said in general of the attendants. It is true that a physician visits these institutions, but he is in every instance a general practitioner who cannot be supposed to keep in touch with modern methods of the treatment of the insane. Enough has been said to show how very much better it would be for these unfortunates if they were in a State institution, where they could receive the best possible care.

This criticism of the county asylums is intensified by the fact that several of them not only care for the insane of the county, but take a considerable number of patients from other counties, for which they receive pay. It must in justice be said that the officers of these institutions do their best, but the appropriations granted by the counties are utterly inadequate to properly equip or conduct a modern hospital for the care and treatment of the insane.

COUNTY ALMSHOUSES.

In general it may be said that the almshouses in the counties of the State are fairly well managed. The inmates are usually comfortably housed and have good, wholesome fare. The superintendent of these institutions is usually a farmer, with a certain amount of political influence, and his main duty is agriculture. In very few instances is an assistant provided, and the inmates of the almshouse are left to their own devices.

It is obvious that no acute insane persons should be sent to these institutions. Demented, idiotic and epileptic cases can be reasonably well cared for, provided the separation of the sexes is strenuously observed.

It is satisfactory to announce that mechanical restraint and seclusion of patients in the almshouses is now rarely seen. With a few exceptions, to be noted in the detailed report, the condition of the almshouses has steadily improved.

THE CARE OF DEMENTED AND IDIOTIC CASES.

A large proportion of the chronic insane, after a certain number of years, pass into a condition of dementia, and for the remainder of their days drag out a sort of vegetable existence. They need no restraint, but must be fed and attended as children. Now, it is not necessary that these patients be allowed to encumber the State hospitals. To quote from the last report, "There is no reason why this class should not remain in the county institutions, provided the almshouse is properly managed and the inmates suitably cared for. As a matter of fact, such cases are a distinct burden to the hospitals for the insane, and occupy room that is needed for cases of acute insanity, or chronic cases that require careful supervision. In the neighboring State of Virginia, for example, where State control prevails, the class of cases mentioned above is a distinct embarrassment to the State hospitals. In regard to the care of such cases in this State, the only question is, whether the county almshouses are sufficiently well equipped and managed. There is no doubt of the fact that most of our almshouses are in very bad repair, and are not properly furnished. The superintendent has the charge of the farm, which, in many instances, is a large one, and he is rarely provided with an assistant. As a result of this system the patients are almost entirely without any proper supervision. The cause of this state of affairs is the utterly inadequate appropriation made by the counties for the support of the pauper insane. The endeavor of the county officials seems to be not the welfare of the pauper insane, but how to support them at a minimum cost. A remarkably low per capita rate for the support of the pauper insane should not be a matter of pride, but, on the contrary, should be regarded as an evidence of a want of proper interest in this most unfortunate class. It is next to impossible to obtain a suitable man to properly supervise the patients in an almshouse and manage a farm on a salary of a few hundred dollars. A far better plan would be for several counties to combine and build and equip a suitable almshouse and employ a competent man, with a matron and one or more assistants. Under this arrangement suitable persons might be secured, and such an institution would be properly equipped and managed, and the individual cost would probably be less than

under the present system. With a large farm it would cost little more to support one hundred patients than fifty. In a collection of a hundred or more patients there would probably be enough able-bodied men to work the farm without the necessity of hiring farm labor. As far as location is concerned, there would be no great difficulty in the plan proposed. Very few of the almshouses ever receive acute medical or surgical cases, and the class of patients that are received could easily be taken to an institution conveniently situated with reference to the three or four counties that would enter into the combination. Each county, of course, would pay its *pro rata*, and it is certain that under this plan the institutions would be vastly better than they are at present, and the cost of maintenance would probably be less than under the present system. This suggestion is certainly worthy of careful consideration."

An ideal plan would be for the State to build and equip a certain number of almshouses, say one on the Eastern Shore, one on the Western Shore, one in Western Maryland and one for Baltimore city. The management ought to be under State control, and the counties could be charged a *per capita* for the support of the persons sent. If we consider the thousands of acres and the number of superintendents now used for the care of the paupers and demented cases, it will be seen that a concentration of this class of unfortunates would be both more economical and more humanitarian.

DUTY OF THE STATE WITH REFERENCE TO INEBRIATES.

That alcoholism has been increasing during the past decade there can be no doubt. As to the relation between alcoholism and insanity the statement of Prof. Kraepelin, of Heidelberg, Germany, one of the highest authorities in the world on this subject, may be quoted:

"It is well known that in the asylums for the insane in the German Empire ten per cent. of the patients have been committed on account of mental diseases due to alcohol. In some institutions the number is as high as thirty per cent, and even then these figures do not include numerous cases in which alcohol has been an exciting, but not the primary, cause of the trouble—in cases

of mania, epilepsy and paresis. In 1898, in the Heidelberg clinic, the alcoholics formed more than thirteen per cent. of the total number of patients; in the men's ward alone the percentage being twenty-five. When we remember that experience teaches that about a third of the living children of alcoholic parents suffer from epilepsy and that, according to Bournville, more than one-half of the idiotic children have alcoholic parents, it is readily seen that there is sufficient reason for the State to take up the consideration of the alcohol question, even if so much misery was not caused in many other directions by this poison."

In addition to the alcohol inebriates must be considered the growing use of opium, chloral, cocaine and other drugs. The unfortunates who have become addicted to the use of these drugs are in a hopeless condition unless strenuous measures be applied for their relief. Recent enactments by the Legislatures of this State make it possible for such persons to be committed for a period, under the jurisdictions of our courts, and it would work great good if this provision of the law were oftener availed of.

It is perfectly feasible to have at Springfield a colony of inebriates, committed for a definite period, who could be recommitted on the first offense after leaving the colony. An incalculable amount of good might be accomplished by this system.

EPILEPTICS.

Former reports of the Lunacy Commission have dwelt at length on the necessity for some provision for epileptics. The Secretary is frequently asked if there is any place where these unfortunates can be placed for care and treatment. When we bear in mind the fact that the number of epileptics closely approximates that of the insane, and that there is no place open to them, it becomes very evident that the State is not doing its full duty. Out of this large number of epileptics in this State there are probably some hundreds who need treatment and training at an institution. The Maryland Asylum and Training School for Feeble Minded is not intended for epileptics, and, moreover, is at present overcrowded. Sooner or later this State will be compelled to follow the lead of many other States in the Union, and establish an epileptic colony. The Silver Cross Home at Port Deposit is doing good work in a

small way, but the question of caring for these unfortunates is not one for private charity, but is a duty the States owes its citizens. In this connection it may be well to call attention to the fact that no provision has been made for colored feeble-minded children. The present excellent institution for white children should be enlarged and a separate building, or group of buildings, erected for colored children.

NEGRO INSANE.

There are about four hundred negro insane in this State, and a glance at the tabular statement will show that more than one-half of this number are in the county asylums and almshouses, while of the white insane only about one-fifth are in the county institutions. In this State it is by no means advisable to attempt to mingle the two races, so that a separate institution for the negro insane is greatly needed. A separate group of buildings should be erected at Springfield for this class, and the negro insane should be removed from the county institutions, where they are at present very indifferently cared for.

THE CRIMINAL INSANE.

There is a steady increase of insanity among the criminal classes, and every year the Lunacy Commission removes a considerable number of convicts from the penitentiary and the jails to institutions for the insane. It is manifestly improper to allow this class to mingle with the non-criminal class. Moreover, there is an added responsibility in caring for the criminal insane, since they cannot be allowed the same amount of liberty as the non-criminals, for fear of their escape as they begin to convalesce. As was suggested in a former report, the State should either purchase the Montevue Hospital at Frederick, which in some respects would answer very well, or erect at Springfield a group of buildings for this class.

LUNACY LAWS.

At the last meeting of the Legislature the Lunacy Commission urged the passage of a bill revising the present laws relating to the insane. This bill was very carefully prepared, and recommended many necessary changes in the laws. It is very much to

be regretted that the bill failed of passage in its entirety, though a few important changes were made. It is to be hoped that the next Legislature will recognize the necessity of enacting proper laws with reference to the insane.

STATE CARE OF THE INSANE.

One of the foremost authorities on the care of the insane, Prof. Kraepelin, of Heidelberg, Germany, who has already been referred to in this report, says: "Among the many achievements in the field of philanthropy of which our century may justly be proud, the advances made in the care of the insane certainly deserve a foremost place. This great development would not have been possible had it not been for the increasing appreciation of the fundamental fact that the effects of mental disturbance are by no means confined to the afflicted persons alone, but that the incidence of insanity is a matter of public interest affecting the well-being of each member of the community." The importance of this subject being admitted, it is manifestly the duty of every citizen to interest himself in the best method of caring for this ever-increasing and most unfortunate class. There is no form of sickness which falls with such terrible weight upon the family of the unfortunate victim as does insanity. Foolishly enough, people still feel that a certain stigma rests upon them if a member of the family becomes insane. Then, while in most cases of chronic illness it is possible to keep the invalid at home, in case of mental disease this is generally impossible.

The expense of maintaining a chronic insane case at a private asylum is very considerable, and only at the command of those in affluent circumstances. There can scarcely be any doubt of the fact that the State should assume the duty of the care of its insane. As has been pointed out, in our State, the county asylums and almshouses cannot properly care for the insane. The superintendents and physicians have had no training in this difficult task, and the equipment of these institutions is in every instance inadequate. It is doubtful whether, under State care, with a centralized system, the cost would be any greater than under the present system. It is certain that the unfortunate insane would be vastly better cared for, and that a much higher percentage

would recover. The day cannot be very far distant when Maryland will be obliged to follow the example set by so many other States and adopt the plan of State care for the insane.

We already have a magnificent plant at Springfield, and the thing to do is to erect a sufficient number of buildings to accommodate all the chronic insane. Then, with some enlargement, perhaps, of Spring Grove, all the acute cases could be cared for at this excellent institution.

We would thus have an ideal system which would tax our people little more than at present, and would permit of carrying out modern and humanitarian methods of treatment. Let us hope that our people will at once recognize the importance of this suggestion and urge the next Legislature to adopt it.

THE WORK OF THE COMMISSION.

The regular quarterly meetings of the Commission have been held, one at Springfield Hospital, the others at the office of the Commission. In addition to these stated meetings the Executive Committee has been summoned a number of times to make special examinations of cases. An unusually large number of cases have been investigated by the Secretary at the Baltimore City Jail, the Maryland Penitentiary, the House of Correction and for the Charity Organization Society. The correspondence increases every year, both from inmates of institutions and from individuals, asking for information.

The Commission may point with pride to the facts that the insane patients requiring asylum treatment have practically all been removed from the county almshouses; that the mingling of the sexes has been largely prevented; that only two suicides have occurred among hospital patients, and that the general condition of the insane has greatly improved during the past year.

MARYLAND HOSPITAL FOR THE INSANE.

(SPRING GROVE ASYLUM.)

This excellent institution has completed its hundred and third year of useful work. The new heating plant has been found satisfactory in every respect, adding greatly to the comfort of the patients. In few hospitals for the insane is such careful attention bestowed upon the important subjects of occupation and entertainment. The *Hospital News*, a paper published and edited exclusively by the patients, is a very creditable production and affords much entertainment. It is to be regretted that the General Assembly did not see fit to make an appropriation for the purchase of much-needed additional ground. The last annual report shows much good work done in the pathological department. The number of patients present on November 31, 1900, was 510, of which 272 were males and 238 females. The private patients numbered 16, and the public 494.

Medical Superintendent—J. PERCY WADE, M. D.

Assistant Physicians—R. EDWARD GARRETT, M. D.,

JESSE C. COGGINS, M. D.,

CORNELIUS DEWEES, M. D.,

THORNTON W. PERKINS, M. D.,

W. TURNER WOOTEN, M. D.

SPRINGFIELD HOSPITAL.

This splendid plant is most admirably adapted to the care of the chronic insane. At the outset it should be recognized that this institution is intended for the custodial care of chronic cases, consequently the percentage of cures must be comparatively low. As has been said before in this report, there is a marked distinction to be drawn between the acute and chronic insane. In the one case every effort is made for cure, while in the latter case the endeavor is to make the patient as comfortable as possible for their remaining days. In general, the chronic cases are sent to Springfield, which, with its excellent equipment and large acreage, is most admirably adapted for this class of cases. There should be added workshops and other facilities for the occupation and entertainment of these patients. The new buildings for women have been completed and occupied during the past year, and will relieve the plethora of the City and State institutions to a very considerable extent.

It is to be hoped that the next Legislature will see fit to make an appropriation sufficiently large to accommodate the negro and criminal insane at this institution. As has been said before, an epileptic colony could be advantageously established at this institution, since the large farm could give ample employment to this class of patients.

The excellent management of this institution warrants the hope that the day is not far distant when all the chronic insane of the State will be kept at Springfield.

Superintendent—JOSEPH CLEMENT CLARK, M. D.

Assistants—JOHN N. MORRIS, M. D.,

CHARLES J. CAREY, M. D.,

LOUISE D. HOLMES, M. D.

BAY VIEW ASYLUM.

This institution, which has been visited several times by the Secretary during the past year, was always found in good condition. Under the present management the insane are very much better cared for than formerly. Unfortunately, the stigma attendant to the "Poor House" applies to the insane department of this excellent institution. The Secretary often advises persons to send their relatives to Bay View, and is met by the response that it is the "Poor House." It is very desirable that the city either send its insane to the State institutions, or establish a city insane hospital. If the latter idea were adopted it would accomplish a great good to inaugurate a detention hospital. Many cases are brought to the different city hospitals under the suspicion of insanity. These cases should be studied for a time before either discharging them or committing them to an asylum. Most of the larger cities have such detention wards, and Baltimore is surely in need of a similar institution. Bay View is exceptionally well managed, and the medical care is of a remarkably high order. Still, the patients have practically no occupation and little or no opportunities for recreation. The city should either dissociate the insane from the ordinary paupers or send them to one of our State institutions.

Superintendent—L. F. ZINKHAN.

Visiting Physician—H. J. BERKLEY, M. D.

Resident Physician—LOUIS W. ARMSTRONG, M. D.

MARYLAND ASYLUM AND TRAINING SCHOOL
FOR FEEBLE MINDED.

The new buildings at this institution, which were described in the last report, are nearly completed and will soon be ready for occupancy. Even with these additional facilities much more room is needed, as is shown by the long waiting list of children who should be in the school. A much-needed law was enacted by the last Legislature, allowing the Board to transfer pupils who have passed the age limit and who are not able to take care of themselves, to be transferred to State Hospital for the Insane.

The Training School is admirably conducted, and it is to be hoped that the State will in future make appropriations ample enough to permit of the much-needed enlargement of the plant. There should by all means be properly equipped industrial shops. Attention has frequently been drawn to the fact that there is no place in the State where colored feeble-minded children can be sent, and it would be perfectly feasible to erect at this institution a group of buildings for this class. The establishment of an epileptic colony would relieve the Training School of a class of patients that are undesirable.

The work of the school during the past year has been excellent and the management entirely satisfactory.

Superintendent—FRANK W. KEATING, M. D.

Attending Physician—WILLIAM H. H. CAMPBELL, M. D.

THE SHEPPARD AND ENOCH PRATT HOSPITAL.

This splendid institution is intended primarily for acute cases of mental disease. It was not the purpose of the founder to establish merely an asylum, but distinctly a hospital for the treatment of such cases as might be expected to improve. This fact should be clearly appreciated, since the action of the Board is sometimes misunderstood when it refuses to receive cases that merely require custodial care, and are not likely to be materially improved by treatment.

During the past year a well-equipped pathological laboratory has been added, and much good work may be expected from the efficient director. On November 30, 1900, there were 95 patients under treatment.

Medical Superintendent—EDWARD N. BRUSH, M. D.

Assistant Physicians—CHARLES M. FRANKLIN, M. D.,

WM. RUSH DUNTON, M. D.

Director of the Laboratory—STEWART PATON, M. D.

Clinical Assistant—CLARENCE B. FARRAR, M. D.

MOUNT HOPE RETREAT.

This large and well-equipped institution was in excellent condition at the visits of the Secretary. The wards and rooms were clean and cheerful and the patients seemed well cared for. The inmates should have more occupation and entertainment. The pathological laboratory is well equipped and is doing good work. The number of patients present November 30, 1900, was 534.

Medical Superintendent—CHARLES G. HILL, M. D.

Visiting Physician—FRANK J. FLANNERY, M. D.,

HERBERT RICHARDSON, M. D.

THE FONT HILL PRIVATE INSTITUTION
FOR FEEBLE MINDED.

This institution is located in a very healthy country, on a large farm, and the care and instruction bestowed upon the children is in every way excellent. The little patients seem happy, and the work turned out by them is most creditable.

Superintendent—SAMUEL J. FORT, M. D.

THE RICHARD GUNDRY HOME.

A number of improvements are to be noted at this excellent private hospital. The walls have been newly painted and decorated, hard-wood floors laid and new bath tubs put in. The golf links afford much entertainment to the patients. It is gratifying to note that the ratio between nurses and patients is nearly 1 to 2. On November 30, 1900, there were 25 patients in the home.

Superintendent—RICHARD F. GUNDRY, M. D.

Assistant Physician—W. R. WHITE, M. D.

CONRAD SANITARIUM.

At the visits of the Secretary to this institution the patients seemed only fairly well cared for. The equipment, bath-room facilities and general management of this institution are much inferior to other institutions of its class in the State, and radical improvements should be made. The case of terminal dementia mentioned in previous reports was better cared for than in former years, but still is not looked after in the proper manner. The number of patients on November 30, 1900, was 22.

Superintendent—ROBERT H. DODGE, M. D.

Assistant Physician—H. T. BRADLEY, M. D.

THE RIGGS COTTAGE FOR THE TREATMENT OF
NERVOUS AND MENTAL DISEASES.

This private sanitarium, pleasantly located near Sykesville, has received during the year a limited number of mild mental cases. The surroundings are cheerful and homelike. The number of patients on November 30, 1900, was 3.

Superintendent—GEORGE H. RIGGS, M. D.

MRS. GUNDRY'S SANITARIUM.

During the past year this institution has gone out of existence. In the tabulated statement will be found the number of patients received and discharged up to the time of the closing of the institution.

THE GUNDRY SANITARIUM.

ATHOL.

During the past year the Lunacy Commission issued a license to Dr. Alfred T. Gundry to establish a sanitarium for the treatment of nervous and mental diseases. The institution is well located near Catonsville, about half a mile north of the Frederick

road. The house is commodious and well adapted for the purpose for which it is intended. The halls and rooms are spacious and the bath room and closet facilities ample. The grounds around the house are extensive and beautifully laid out. The Sanitarium will be managed by Dr. Alfred T. Gundry, who lives in the building; Dr. L. H. Gundry the visiting physician, and the Misses Gundry.

BELLEVUE ASYLUM.

(WASHINGTON COUNTY.)

This institution combines fairly well the asylum and almshouse features. When visited by the Secretary it was clean and in good repair. There were no cases that required removal to State hospitals for the insane.

Superintendent—C. H. DEIBERT.

Visiting Physician—C. B. BOYLE, M. D.

CHERRY HILL.

(CECIL COUNTY.)

This institution was found to be in very good condition at the visits of the Secretary during the past year. The same criticism passed upon the other county asylums is applicable in this case. There is not the proper supervision of the patients, the number of attendants is inadequate and there is not enough occupation provided. The building is inadequate and not properly furnished, and there is lacking the experience in the care of insane patients. The cases confined in this asylum would be better looked after in one of our State institutions. There were present on November 30, 1900, 25 patients.

Superintendent—A. T. ABERNATHY.

Visiting Physician—P. B. HOUSEKEEPER, M. D.

MONTEVUE ASYLUM.

(FREDERICK COUNTY.)

Little can be added concerning this institution to the report of last year. The main building is clean and well kept, though the plan of having sane and insane paupers in the same building, even though they are separated, is not to be commended. The building which is used for the negro insane was even more overcrowded at the last visit of the Secretary than it has been at previous inspections, and under these conditions it is impossible to keep the rooms as clean as they should be. The condition of affairs is the more reprehensible since a large number of the negro patients are received from other counties for compensation. The Secretary was pleased to note that the patients are kept more out of doors, when the weather is favorable, than was formerly the case. The number of attendants is inadequate, and there can be no doubt of the fact that the general care and treatment is distinctly below that afforded at the State hospitals. There were present on November 30, 1900, 142 patients.

Superintendent—FULTON B. RICE.

Visiting Physician—HENRY P. FARNEY, M. D.

SYLVAN RETREAT.

(ALLEGANY COUNTY.)

This institution shows some improvements since the last inspection of the Secretary. A much-needed night watchman has been employed, thus insuring greater safety and comfort to the patients. A new reservoir with fine water and a commodious icehouse and cold-storage plant have been constructed. New furnaces have been put in during the past year, which was a much-needed improvement. The criticism in previous reports on the want of employment of the patients still holds good, and the recreation grounds are entirely inadequate for the needs of the patients. There were present on November 30, 1900, 89 patients.

Superintendent—ARTHUR W. JENKINS.

Visiting Physician—CHARLES H. BRACE, M. D.

ALLEGANY COUNTY ALMSHOUSE.

This almshouse is within a few steps of the asylum proper and is a somewhat antiquated structure. It must be said, however, that it was in better condition than on any previous inspection. The cases coming under the Lunacy Act, feeble minded and demented, numbered, on November 30, 1900, 14.

Superintendent—SAMUEL WARWICK.

Visiting Physician—CHARLES H. BRACE, M. D.

ANNE ARUNDEL COUNTY ALMSHOUSE.

This almshouse was in very good condition when visited by the Secretary. The rooms are clean and well kept, and the inmates seemed well cared for. There were no cases that needed hospital care. The number of patients on November 30, 1900, was 7.

Superintendent—OLIVER PERRY.

Visiting Physician—JOHN COLLISON, M. D.

BALTIMORE COUNTY ALMSHOUSE.

This almshouse is, as usual, well managed, clean and comfortably furnished. There are rather more insane in the institution than there should be.

Superintendent—E. C. TRACEY.

Visiting Physician—THOMAS C. BUSSEY, M. D.

CAROLINE COUNTY ALMSHOUSE.

No improvements are to be noted in this almshouse. The building occupied by the white patients is clean and comfortable. The cabins for the negroes, to which attention has frequently been called, are a disgrace to the county. One room, at the time of the Secretary's visit, was occupied by two men and two women, all colored.

It is a satisfaction to report that the case, which for so many years has been chained to a tree in summer, and shut up in a cell in winter, has at last been removed to an institution for the insane. There are no cases in this almshouse that require removal to a hospital for care or treatment.

Superintendent—S. T. NORRIS.

Visiting Physician—DR. MANSHIP.

CARROLL COUNTY ALMSHOUSE.

This almshouse is by no means what it should be. The buildings are sadly out of repair and the sanitary arrangements are bad. Fortunately there are no acute cases of insanity here, but the management of the chronic cases is far from satisfactory. The whole air of the institution is one of neglect and incompetency.

Superintendent—E. BERWAGER.

Visiting Physician—L. ZEPP, M. D.

CECIL COUNTY ALMSHOUSE.

In this institution there are only a few cases coming under the lunacy act—cases only of idiocy and terminal dementia—and they seem well cared for. This house is clean and well kept. The number of insane or feeble-minded is 8.

Superintendent—CHARLES MOODY.

Visiting Physician—P. B. HOUSEKEEPER, M. D.

DORCHESTER COUNTY ALMSHOUSE.

This almshouse, with its new building, was found clean and the inmates well attended to. There were no cases requiring removal. The Secretary would suggest that an able-bodied woman be employed to attend the cleaning of the building, since most of the inmates are too feeble to aid much in this work. The number of inmates coming under the Lunacy Act was, at the Secretary's last visit, 12.

Superintendent—A. B. LECOMPTE.

Visiting Physician—ROBERT PRICE, M. D.

HARFORD COUNTY ALMSHOUSE.

The condition in this almshouse has distinctly improved since last year. The rooms are much better kept, lamps have been put up in the halls, and altogether the institution is in far better condition than formerly. There are no cases that require removal. The number of insane cases on November 30, 1900, was 13.

Superintendent—NOAH SMALL.

Visiting Physician—E. HALL RICHARDSON, M. D.

KENT COUNTY ALMSHOUSE.

This institution is somewhat out of repair and overcrowded. It would be well if some of the distinctly insane inmates were sent to one of our State hospitals.

Superintendent—WILLIAM FORD.

Visiting Physician—CHARLES W. WHALAND, M. D.

MONTGOMERY COUNTY ALMSHOUSE.

While the buildings of this almshouse are somewhat dilapidated and in need of repairs, the patients are well cared for, and the rooms are clean and neat. There are no cases that require removal and the institution is well conducted.

Superintendent—L. RICKETTS.

Visiting Physician—E. ANDERSON, M. D.

PRINCE GEORGE'S COUNTY ALMSHOUSE.

No improvements are to be noted in this very poor almshouse. The buildings are far from what they should be, and the negro quarters are a disgrace to the county. The water supply is bad, and altogether this almshouse is one of the worst in the State. It is to be hoped that this county will make radical improvements or discontinue the institution.

Superintendent—RICHARD S. BELL.

Visiting Physician—J. L. WARING, M. D.

QUEEN ANNE'S COUNTY ALMSHOUSE.

This almshouse was not in as good condition on the last inspection as it has been formerly. The building for the more agitated cases was not clean and was illy ventilated. There are three cases that should be removed to State institutions. The buildings for the negro insane are dilapidated and not well attended to. There were rather fewer cases coming under the Lunacy Act in this almshouse than there were last year, the number on November 30, 1900, being 23.

Superintendent—WILLIAM JESTER.

Visiting Physician—JAMES HOLTON, M. D.

ST. MARY'S COUNTY ALMSHOUSE.

The Secretary is glad to report that this dilapidated structure has at last been abandoned as an almshouse, the paupers being farmed out and the insane transferred to State institutions. It is hoped that this example will be followed in some of the other counties.

SOMERSET COUNTY ALMSHOUSE.

No improvements are to be noted at this almshouse. The chronic insane seem to be fairly well cared for, but the negro quarters are dilapidated and ill kept. No insane persons should be sent to this institution.

Superintendent—MR. PRITCHETT.

Visiting Physician—MARTIN GOLDSBOROUGH, M. D.

TALBOT COUNTY ALMSHOUSE.

This almshouse is clean and well kept. The inmates are properly looked after, and the whole air of the institution is wholesome. The matron is a very efficient person and looks after the comfort of the inmates. There are but one or two cases here that ought to be removed.

Superintendent—GEORGE CAMPER.

Visiting Physician—JAMES B. MERRITT, M. D.

WICOMICO COUNTY ALMSHOUSE.

The buildings are dilapidated, though clean, and there is an air of decay about this almshouse. There are, fortunately, no acute cases of insanity in this institution. It is no fit place for paupers, not to mention the insane.

Superintendent—H. J. SEABREASE.

Visiting Physician—W. H. H. DASHIELL, M. D.

WORCESTER COUNTY ALMSHOUSE.

No improvements have been made in this old institution since the last report. The buildings are old and dilapidated. Many of the rooms have merely brick floors, which are both uncomfortable and unsanitary. The cabin in which the negro patients are kept is entirely unfitted for this purpose. A very comfortable building for the superintendent's residence has been erected during the year. There are no acute mental cases in this almshouse.

Superintendent—GEORGE JARMAN.

Visiting Physician—W. D. STRAUGHN, M. D.

TABLE No. 1.

Showing the Statistics of the State and City Hospitals for the Insane and Feeble-minded.

| HOSPITALS. | Remaining Nov. 30, 1899. | | | | | Admitted from Nov. 30, 1899, to Nov. 30, 1900. | | | | | Showing the Condition of Patients Discharged from November 30, 1899, to November 30, 1900. | | | | | Remaining Nov. 30, 1900. | | | | |
|---|--------------------------|---------|----------|---------|--------|--|---------|----------|---------|--------|--|-----------|-------------|-------|--------|--------------------------|---------|----------|---------|--------|
| | White. | | Colored. | | Total. | White. | | Colored. | | Total. | | | | | | White. | | Colored. | | Total. |
| | Male. | Female. | Male. | Female. | | Male. | Female. | Male. | Female. | | Recovered. | Improved. | Unimproved. | Died. | Total. | Male. | Female. | Male. | Female. | |
| Maryland Hospital for the Insane (Spring Grove)..... | 245 | 235 | 31 | 25 | 536 | 38 | 41 | 7 | 4 | 90 | 18 | 15 | 41 | 42 | 116 | 240 | 212 | 32 | 26 | 510 |
| Second Hospital for the Insane (Springfield) | 197 | | ... | ... | 197 | 70 | 85 | ... | ... | 155 | 15 | 7 | 1 | 10 | 33 | 235 | 83 | ... | ... | 318 |
| Bay View Asylum | 44 | 188 | 57 | 78 | 367 | 39 | 49 | 24 | 24 | 136 | 7 | 36 | 43 | 52 | 138 | 39 | 185 | 60 | 81 | 365 |
| Maryland Asylum and Training-School for the Feeble-minded | 53 | 41 | ... | .. | 94 | 4 | 2 | ... | ... | 6 | | 1 | 5 | .. | 6 | 52 | 41 | ... | ... | 94 |
| Totals | 539 | 464 | 88 | 103 | 1194 | 151 | 177 | 31 | 28 | 387 | 40 | 59 | 90 | 104 | 293 | 566 | 522 | 92 | 107 | 1287 |

TABLE No. 2.

Showing the Statistics of the Private and Corporate Institutions for the Insane.

| INSTITUTIONS. | Remaining Nov. 30, 1899. | | | Admitted from Nov. 30, 1899, to Nov. 30, 1900. | | | Showing the Condition of Patients Discharged from November 30, 1899, to November 30, 1900. | | | | | Remaining Nov. 30, 1900. | | |
|--|-----------------------------|---------|--------|--|---------|--------|---|-----------|-------------|-------|--------|-----------------------------|---------|--------|
| | Male. | Female. | Total. | Male. | Female. | Total. | Recovered. | Improved. | Unimproved. | Died. | Total. | Male. | Female. | Total. |
| Mount Hope Retreat..... | 255 | 345 | 600 | 60 | 95 | 155 | 62 | 33 | 17 | 59 | 171 | 237 | 347 | 584 |
| Sheppard and Enoch Pratt Hospital..... | 49 | 49 | 98 | 49 | 60 | 109 | 29 | 30 | 27 | 12 | 98 | 46 | 49 | 95 |
| Richard Gundry Home | 10 | 21 | 31 | 27 | 20 | 47 | 16 | 29 | 4 | 4 | 53 | 8 | 17 | 25 |
| Conrad's Sanitarium | 7 | 7 | 14 | 12 | 9 | 21 | 15 | 5 | 1 | 4 | 25 | 10 | 12 | 22 |
| Rigg's Cottage | 1 | 2 | 3 | 1 | 2 | 3 | ... | 2 | ... | 1 | 3 | 1 | 2 | 3 |
| Font Hill Training-School | 16 | 6 | 22 | 2 | 2 | 4 | .. | 2 | 1 | 1 | 4 | 17 | 5 | 22 |
| * Mrs. Gundry's Sanitarium | ... | 6 | 6 | .. | 15 | 15 | 10 | 10 | 1 | ... | 21 | ... | ... | ... |
| Totals..... | 338 | 436 | 774 | 151 | 203 | 354 | 132 | 111 | 51 | 81 | 375 | 319 | 432 | 751 |

* Closed October 30, 1900.

TABLE No. 3.

Showing the Statistics of the County Asylums for the Insane.

| ASYLUMS. | Remaining Nov. 30, 1899. | | | | | Admitted from Nov. 30, 1899, to Nov. 30, 1900. | | | | | Showing the Condition of Patients Discharged from November 30, 1899, to November 30, 1900. | | | | | Remaining Nov. 30, 1900. | | | | |
|--|--------------------------|---------|----------|---------|--------|--|---------|----------|---------|--------|--|-----------|-------------|-------|--------|--------------------------|---------|----------|---------|--------|
| | White. | | Colored. | | Total. | White. | | Colored. | | Total. | | | | | | White. | | Colored. | | Total. |
| | Male. | Female. | Male. | Female. | | Male. | Female. | Male. | Female. | | | | | | | Male. | Female. | Male. | Female. | |
| | Male. | Female. | Male. | Female. | Total. | Male. | Female. | Male. | Female. | Total. | Recovered. | Improved. | Unimproved. | Died. | Total. | Male. | Female. | Male. | Female. | Total. |
| Montevue (Frederick County).. | 37 | 43 | 30 | 37 | 147 | 4 | 5 | 13 | 8 | 30 | 12 | 4 | ... | 14 | 30 | 35 | 40 | 32 | 35 | 142 |
| Sylvan Retreat (Allegheny County)..... | 39 | 42 | .. | 2 | 83 | 13 | 3 | .. | 1 | 17 | 2 | 1 | 4 | 4 | 11 | 43 | 44 | ... | 2 | 89 |
| Cherry Hill (Cecil County)... | 15 | 9 | 5 | 2 | 31 | 1 | ... | ... | 1 | 2 | ... | 5 | ... | ... | 5 | 11 | 7 | 5 | 2 | 25 |
| Bellevue (Washington County). | 28 | 29 | 5 | 5 | 67 | 4 | 2 | .. | ... | 6 | 2 | ... | 4 | 1 | 7 | 16 | 21 | 4 | .. | 41 |
| Totals.. | 119 | 123 | 40 | 46 | 328 | 22 | 10 | 13 | 10 | 55 | 16 | 10 | 8 | 19 | 53 | 105 | 112 | 41 | 39 | 297 |

TABLE No. 4.

Showing the Statistics of the County Almshouses in Which Insane Are Kept.

| COUNTY ALMSHOUSES. | Remaining Nov. 30, 1899. | | | | | Admitted from Nov. 30, 1899, to Nov. 30, 1900. | | | | | Showing the Condition of Patients Discharged from November 30, 1899, to November 30, 1900. | | | | | Remaining Nov. 30, 1900. | | | | |
|--------------------|--------------------------|---------|----------|---------|--------|--|---------|----------|---------|--------|--|----|----|----|----|--------------------------|---------|----------|---------|--------|
| | White. | | Colored. | | Total. | White. | | Colored. | | Total. | Showing the Condition of Patients Discharged from November 30, 1899, to November 30, 1900. | | | | | White. | | Colored. | | Total. |
| | Male. | Female. | Male. | Female. | | Male. | Female. | Male. | Female. | | | | | | | Male. | Female. | Male. | Female. | |
| Allegany | 6 | 10 | .. | .. | 16 | .. | .. | 1 | .. | 1 | .. | 3 | .. | .. | 3 | 6 | 7 | 1 | .. | 14 |
| Anne Arundel | 5 | 2 | 3 | .. | 10 | .. | .. | .. | 1 | 1 | 11 | .. | .. | .. | 11 | 3 | 2 | 1 | 1 | 7 |
| Baltimore | 7 | 6 | 4 | 6 | 23 | 3 | 2 | 3 | 1 | 9 | .. | .. | .. | 3 | 3 | 12 | 7 | 3 | 7 | 29 |
| Caroline | .. | 2 | 2 | 3 | 7 | .. | .. | .. | 1 | 1 | .. | .. | 1 | 1 | 2 | .. | 2 | 1 | 2 | 5 |
| Carroll | 5 | 6 | 3 | 1 | 15 | 1 | 1 | .. | .. | 2 | .. | 1 | .. | 1 | 2 | 4 | 3 | 1 | 1 | 9 |
| Cecil | 16 | 3 | 6 | 2 | 27 | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 5 | 1 | 2 | .. | 8 |
| Dorchester | 3 | 4 | 3 | 2 | 12 | 1 | .. | 1 | .. | 2 | .. | .. | .. | 1 | 1 | 3 | 2 | 4 | 2 | 11 |
| Harford | 3 | 2 | 4 | 5 | 14 | 5 | 3 | .. | .. | 8 | 6 | 1 | 1 | 4 | 12 | 4 | 4 | 2 | 3 | 13 |
| Kent | 2 | 3 | 3 | 4 | 12 | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | 2 | 2 | 1 | 1 | 6 |
| Montgomery | 3 | 2 | 3 | 4 | 12 | .. | 1 | 1 | 1 | 3 | .. | .. | 1 | 1 | 2 | 2 | 4 | 5 | 3 | 14 |
| Prince George's | 3 | 2 | 4 | 5 | 14 | .. | 1 | 2 | .. | 3 | .. | .. | .. | .. | .. | 1 | 1 | 2 | 3 | 7 |
| Queen Anne's | 6 | 5 | 5 | 9 | 25 | 3 | 1 | .. | 1 | 5 | .. | .. | 3 | 7 | 10 | 8 | 5 | 4 | 6 | 23 |
| St. Mary's | .. | 1 | 1 | 3 | 5 | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. | .. |
| Somerset | 1 | 2 | 1 | 1 | 5 | 1 | 1 | 1 | 2 | 5 | .. | .. | 1 | 1 | 2 | 2 | 3 | 2 | 3 | 10 |
| Talbot | 2 | 3 | 4 | 7 | 16 | .. | 2 | 1 | 2 | 5 | 1 | 1 | 1 | .. | 3 | 2 | 3 | 4 | 7 | 16 |
| Wicomico | 3 | 1 | 5 | 4 | 13 | .. | .. | .. | 3 | 3 | .. | 1 | 2 | 1 | 4 | 2 | 1 | 1 | 2 | 6 |
| Worcester | 5 | 1 | 1 | 2 | 9 | .. | 1 | .. | .. | 1 | .. | .. | .. | .. | .. | 6 | 5 | 1 | 2 | 14 |
| Totals | 70 | 55 | 52 | 58 | 235 | 14 | 13 | 10 | 12 | 49 | 18 | 7 | 10 | 20 | 55 | 62 | 52 | 35 | 43 | 192 |

TABLE No. 5.

Showing the Statistics of the Colored Insane.

(These figures are given in detail in the preceding Tables.)

| INSTITUTIONS. | Remaining Nov. 30, 1899. | Admitted from Nov. 30, 1899, to Nov. 30, 1900. | Remaining Nov. 30, 1900. |
|---|-----------------------------|--|-----------------------------|
| State and City Hospitals for the Insane..... | 191 | 59 | 199 |
| County Asylums. | 86 | 23 | 80 |
| County Almshouses..... | 110 | 22 | 78 |
| Totals..... | 387 | 104 | 357 |

TABLE No. 6.

Showing a Comparison Between the Years 1899 and 1900.

| YEARS. | Admitted. | Discharged or Died. | Remaining November 30. |
|------------|-----------|------------------------|---------------------------|
| 1899 | 765 | 666 | 2531 |
| 1900 | 845 | 776 | 2527 |